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**Abdomen depth and rectus abdominis thickness predict surgical site infection in patients receiving elective radical resections of colon cancer**

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Background: Surgical site infection (SSI) is a common complication after elective radical resections of colon cancer. The aim of this study was to investigate the predictive value of abdomen depth (AD) and rectus abdominis thickness (RT) for SSI in patients receiving elective radical resections of colon cancer.

Methods: A total of 100 patients who underwent elective radical resections of colon cancer were included in this study. The abdomen depth (AD) and rectus abdominis thickness (RT) were measured preoperatively. The SSI rate was compared between the patients with AD < 5.5 cm and AD ≥ 5.5 cm, and between the patients with RT < 1.5 cm and RT ≥ 1.5 cm. The predictive value of AD and RT for SSI was evaluated using logistic regression analysis.

Results: The SSI rate was significantly higher in patients with AD ≥ 5.5 cm (P = 0.0022) and RT ≥ 1.5 cm (P = 0.014). The adjusted odds ratio (AOR) for SSI in patients with AD ≥ 5.5 cm was 1.007 (95% CI: 0.74-1.36, P = 0.029). The AOR for SSI in patients with RT ≥ 1.5 cm was 1.007 (95% CI: 0.74-1.36, P = 0.0026).

Conclusion: AD and RT are independent predictors of SSI in patients receiving elective radical resections of colon cancer. AD ≥ 5.5 cm and RT ≥ 1.5 cm are associated with a higher risk of SSI.

**Biography**

Song Liu has completed his MD and PhD from Nanjing University and Postdoctoral studies from Massachusetts General Hospital, Harvard Medical School. He is also an Attending Doctor of General Surgery, Nanjing Drum Tower Hospital. He has published 18 papers in scientific journals.

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